

<b>DEFENSE MANAGEMENT EDUCATION AND TRAINING PROGRAM REQUIREMENTS/QUOTA ASSIGNMENTS</b>					FISCAL YEAR		REPORT CONTROL SYMBOL		
TO:					FROM:				
SUBMITTING SERVICE/AGENCY <input type="checkbox"/> ARMY <input type="checkbox"/> NAVY <input type="checkbox"/> AIR FORCE <input type="checkbox"/> DSA <input type="checkbox"/> OTHER - DOD <input type="checkbox"/> NON - DOD									
NAME OF SCHOOL									
<b>RESIDENT/NON-RESIDENT COURSES</b>									
COURSE NUMBER	COURSE TITLE	FISCAL YEAR	QTR.	REQUIREMENTS			QUOTAS		
				OFCR.	ENLIST	CIV.	OFCR.	ENLIST	CIV.
			1						
			2						
			3						
			4						
			TOTAL						
			1						
			2						
			3						
			4						
			TOTAL						
			1						
			2						
			3						
			4						
			TOTAL						
			1						
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			4						
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			1						
			2						
			3						
			4						
			TOTAL						
			1						
			2						
			3						
			4						
			TOTAL						
<b>GRAND TOTAL</b>									